2017-2022 Healthcare Preparedness and Response Capabilities and Performance Measures

6 Domain Strategies and 4 Capabilities

Budget Period 1

July 1, 2017 - June 30, 2018



Purpose of Healthcare Preparedness and Response Capabilities

The Office of the Assistant Secretary for Preparedness and Response (ASPR) leads the country in preparing for, responding to, and recovering from the adverse health effects of emergencies and disasters.

ASPR provides clear expectations and priorities for HPP awardees and the HPP-funded Healthcare Coalitions (HCCs) in the Funding Opportunity Announcement (FOA) that begins on July 1, 2017.



	Domain	Activity	НСС	РМ
	. Strengthen Community Resilience	Partner with Stakeholders by developing/Maturing HCC	Must define/implement governance structure by September 30, 2017	#3 Additional structural guidance FOA
			Must ensure core membership: Hospitals (2), EMS (Interfacility/other non-EMS patient transport system), EM organizations, Public Health Agencies	#3
		Must Document: Structure and Must be prepared to submit to an HPP FPO if requested: HCC Membership, Org. structure to support HCC activities, member guidelines for participation, policies/procedures, integration with state, local and member specific IM structures	#3	
			Once boundaries are established, must coordinate with all ESF-8 lead agencies	#3

Domain	Activity	НСС	PM
1. Strengthen Community Resilience		Must develop a Preparedness Plan and submit March 31, 2018. Plan Must be approved by all core members. Must update as necessary and after exercises and real events. Must be approved by core members. Additional members must be given opportunity to proved input to plan and all member organizations must receive a final copy	#4 Additional structural guidance FOA
	Characterize the Probable Risk of the jurisdiction & HCC	Must complete and submit an annual Hazard Vulnerability Assessment (HVA) by December 31, 2017. HCC must have opportunity to provide input into state JRA	#10 (HCC input into JRA)
	Characterize Populations at Risk	Must review the mapping data for the CDPHE/OEPR Colorado Community Inclusion within their HCC region at least twice annually and indicate in reporting spreadsheet in CoSHARE	#6 (a & b)

Domain	Activity	НСС	РМ
1. Strengthen Community Resilience	Characterize Populations at Risk	Refer to FOA for complete list inclusive planning for populations at risk.	
	Engage Communities & Healthcare Systems	Sustainability and HCC Value: See FOA for list of activities to promote HCC sustainability	
		Must engage its members healthcare executives in debriefs ("hot washes") related to exercises, planned events, and real events. Additional recommendations in FOA to work with/engage community leaders	#14
	Operationalize Response Plans	HPP, PHEP awardees and each HCC as part of a statewide effort, must conduct a joint statewide exercise (functional or full scale) once during the project period to test progress toward achieving the capabilities	

olish Incident Command ctures for Healthcare nizations	HCC must ensure assistance with members with NIMS implementation throughout project period	Additional structural guidance FOA
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Domain	Activity	НСС	PM
3. Strengthen Information Management	Share Situational Awareness Healthcare and Public Health Systems	HCC must provide situational awareness data as requested. Must agree to participate in current and future federal healthcare situational awareness initiatives for the duration of the five-year project period	Additional structural guidance FOA
	Share Emergency Information & warnings across disciplines, jurisdictions, HCCs and their members	HCC conduct redundant communication drill twice annually and indicate in reporting spreadsheet in CoSHARE	#12
4. Strengthen Countermeasures	Manage Access to and Administration of Pharmaceutical Interventions	HCC Must understand their jurisdictional SNS distribution plans. Must be engaged in development, training and exercising SNS distribution plans. Collaborate with PHEP to assist HCCs with closed POD plans	

Domain	Activity	нсс	PM
Strengthen Countermeasures	Manage Access to and Administration of Pharmaceutical Interventions	HCC purchasing pharmaceuticals or other medical material must document strategies for acquisition, storage and rotation. Strategies must be made available to FPO if requested. No specified BP for this activity.	Additional structural guidance FOA
	Ensure Safety and Health of Responders	HCC must equip, train, and provide resources necessary to protect responders, employees, and their families from hazards during response and recovery operations. No specified BP for this activity.	
5. Strengthen Surge Management	Address Mass Care Needs	Serve as planning resource for medical needs	
	Address Surge Needs	Serve as planning resource and SMEs to PHEP for family reunification. Collaboration with PHEP for planning resources during infectious disease outbreak. See FOA for details for list of joint activities. No specified BP for this activity.	

Domain	Activity	нсс	PM
5. Strengthen Surge Management	Conduct Health Healthcare Facility Evacuation Planning and Executive Evacuations	HCC and HCC members must ensure all healthcare organizations, public health agencies, and emergency management organizations are included in evacuation, transportation, and relocation planning and execution during exercises and submit in CoSHARE low-notice Medical Surge Exercise AAR/IP by April 30, 2018	#13-20 (Surge Test)Additional structural guidance FOA
	Address Emergency Department & Inpatient Surge	HCC and HCC members must plan and respond together to address emergency department and inpatient surge with the goal of ensuring IBA through the five-year project period	Additional structural guidance FOA
	Alternative Care Systems	Awardees and HCC are encouraged to consider additional factors in their alternative care system prior to end of BP5. Nothing due BP1	

Domain	Activity	нсс	PM
5. Strengthen Surge Management	Specialty Surge (Pediatric Care, Chemical or Radiation Emergency Incident, Burn and Trauma Care, Behavioral Needs, Infectious Disease)	See FOA for recommendations in specialty care situations. These requirements are due prior to end of BP5. Nothing due BP1	#8 Additional structural guidance FOA
		HCC must include HAI coordinators and quality improvement professionals at the healthcare facility and jurisdictional levels in their activities, including planning, training, and exercises/drills; also include HCC leaders in state HAI coordination work groups	Additional structural guidance FOA
		HCC and their members must expand existing EBOLA concept of operations plans (CONOPs) to enhance preparedness and response for all infectious disease emergencies that stress the healthcare delivery system. No designated BP period	

Need More information?

Contact: Carolyn Elliott, Healthcare Coalition Coordinator

Colorado Department of Public Health and Environment-Office of Emergency Response and Preparedness

Email: <u>carolyn.elliott@state.co.us</u>

Phone: 303-692-3020 Office

720-591-8652 Cell

